PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number			
L			fective Dece			)4		, , , , , , , , , , , , , , , , , , ,	10/5	<u>.</u>	1071	
		CLAIMS A	AS FILED -					SMALL ENT	[ITY	~ C	OTHER	
115	LAMOTONAL	STAGE FEES	(Column	n 1)	T	(Column 2)	1			OR <b>1</b>		T
		STAGE FEED	30	7	<del> </del>			RATE	FEE , a	4	RATE	FEE
<u> </u>	SIC FEE		SMALL ENT.		<u> </u>	GE ENT. = \$ 300	]	BASIC FEE		OR	BASIC FEE	300
EXA	AMINATION FE	:E	Satisfies PCT Ar (4) = \$ 50 /	/\$ 100	\$	other situations = \$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	VI
SEA	ARCH FEE		U.S. is ISA = \$ ALL other course \$ 200 / \$ 4	untries =	ALLO	other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE	FOR EXTRA S	SPEC. PGS.	minu	us 100 =		/ 50 =		X \$ 125 =		'	X \$ 250 =	
тот	TAL CHARGEAE	BLE CLAIMS	QQ mir	nus 20 =	* 6	\$		X \$ 25 =		OR	X \$ 50 =	100
INDE	EPENDENT CL	AIMS	2 m	ninus 3 =	*			X \$ 100 =		OR	X \$ 200 =	7
MUL	TIPLE DEPEN	IDENT CLAIM PRE	ESENT	$\overline{\Lambda}$				+ \$ 180 =		OR	+ \$ 360 =	
* If	the difference	e in column 1 is le	less than zero	, enter "(	0" in cc	olumn 2	1	TOTAL		OR	TOTAL	1000
ĺ		CLAIMS AS A	AMENINEN	ם אם	<del>-</del> 11							<del></del>
	•	(Column 1)	AMENDED		(TIII ımn 2)	(Column 3)		SMALL E	ENTITY	OR	OTHER SMALL E	
ITA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	HEST MBER IOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total		Minus	**	FUR	=		X \$ 25 =		OR	X \$ 50 =	FLL
MENC	Independent	1.	Minus	***		=	1	X \$ 100 =		OR	X \$ 200 =	<del> </del>
₹		SENTATION OF MI		ENDENT	CLAIM		1					· .
		torri i i i i i i i i i i i i i i i i i i					i I	+ \$ 180 = TOTAL ADDIT.	<b> </b>	OR OR	+ \$ 360 = TOTAL ADDIT.	<u> </u>
								FFF		UN	FFF	
	<del></del>	(Column 1)		(Colun		(Column 3)	٠,			. ,		
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	MBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	1.	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AMEN	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	SENTATION OF MU	ULTIPLE DEPE	INDENT (	CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
							-	TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
									_		_	
*	# the entry in coll	umn 1 is less than the	- ceter in column (	O weita "O"	te solum	<b>a</b>						
**	If the "Highest Nu	umn Tis less than the umber Previously Paid umber Previously Paid	id For' IN THIS SPA	PACE is less	ss than '20	0', enter "20".						
	The "Highest Nun	mber Previously Paid	For" (Total or Inde	ependent) i	s the hig	nest number found i	in th	e appropriate box	in column 1.			